FORM D SECULAR SECULAR

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	O 1712
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average bu	ırden
hours per form	16.00
t .	

OMR APPROVAL



Name of Offering (☐ che	eck if this is an amendme	nt and name has o	changed, and ind	icate change.)						
Offering of Limited Partners	ship Interests of Meridia	n Horizon Fund, I	L.P.		431	1113				
Filing Under (Check box(es) the	hat apply): \square F	Rule 504	Rule 505	⊠ Rule 506	☐ Section 4(6)	ULOE				
Type of Filing: Nev	v Filing 🖂 A	Amendment				PROCESSED				
	A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer									
A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer arm of Issuer check if this is an amendment and name has changed, and indicate change.										
Name of Issuer	ress of Executive Offices (Number and Street, City, State, Zip Code) Meridian Capital Partners, Inc., 20 Corporate Woods Boulevard, 4 th Floor, Albany, NY 12211 Telephone Number (Including Area Code) (518) 432-1600									
Meridian Horizon Fund, L.P.	Meridian Horizon Fund, L.P.									
Address of Executive Offices		(Nu	mber and Street,	City, State, Zip Code	e) Telephone N					
c/o Meridian Capital Partner	s, Inc., 20 Corporate Wo	oods Boulevard,	4 th Floor, Albany	, NY 12211	(518) 432-16	500				
Address of Principal Offices (Meridian Capital Partners, Inc., 20 Corporate Woods Boulevard, 4 th Floor, Albany, NY 12211 (518) 432-1600 ress of Principal Offices (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)									
Brief Description of Business:	Investment in sec	urities through a	diverse group o	of investment mana	gers.					
Type of Business Organization	n									
☐ corpor	ration		ership, already fo	ormed	other (please s	specify)				
☐ business trust ☐ limited partnership, to be formed										
MonthYear										
Actual or Estimated Date of In	corporation or Organizati	on: 0	6	9	1 ⊠ A	ctual Estimated				
Jurisdiction of Incorporation o	A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed, and indicate change. Check if this is an amendment and name has changed. Check if this is an amendment and indicate change. Check if this is an amendment and indicate change. Check									
		CN for	Canada; FN for	other foreign jurisdict	tion)	D E				

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5-05)

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Each beneficial owrEach executive office	e issuer, if the issuer having the pover and director of	suer has been organized with	ect the vote or disposition of	of, 10% or more of ging partners of par	a class of equity securities of the issuer; tnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Meridian Capital Parti	ners, Inc.		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e): 20 Corporate Woo	ods Boulevard, 4 th	Floor, Albany, NY 12211
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Lawrence, William H.			
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Halldin, Donald J.			
Business or Residence Addr Floor, Albany, New York 12		Street, City, State, Zip Code	e): c/o Meridian Capit	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Sica, John		****	
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capi	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Hickey, Timothy M.			
Business or Residence Addr Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capi	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Smith, Laura K.		· · · · · · · · · · · · · · · · · ·	
Business or Residence Addr Floor, Albany, NY 12211	ress (Number and	Street, City, State, Zip Code	e): c/o Meridian Capi	tal Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):			. 41.	
Business or Residence Add	ress (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORM	MATION	ABOUT	OFFER	ING			
1	·												
1. 1	las the issue	er sold, or o	does the is	suer inten	d to sell, to Answer a	non-accr also in App	edited inve endix, Co	estors in th lumn 2, if f	is offering iling under	? · ULOE.		☐ Yes	⊠ No
2. \	Vhat is the n	ninimum in	vestment t	hat will be	accepted	from any i	ndividual?						000,00 <u>0**</u> be waived
		,											
	oes the offe											⊠ Yes	□ No
6 (4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
Full N	ame (Last n	ame first, it	f individual)									
Busin	ess or Resid	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)	···					
Name	of Associate	ed Broker o	or Dealer				***			-			
	in Which P												☐ All States
, [A]	_		[AR]		[CO]			☐ [DC]		☐ [GA]	☐ [HI]	☐ [ID]	☐ All States
□ [IL	[IN]	□ [IA]	□ [KS]	[KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ (M	T] 🗌 [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	☐ [NY]	□ [NC]	□ [ND]	[HO]	□ [OK]	□ [OR]	☐ [PA]	
□ [R] 🗆 [SC]	□ [SD]	□ [TN]	□ [TX]	[TU]	[√]	□ [VA]	[WA]		[WI]	[WY]	□ [PR]	
Full N	ame (Last n	ame first, it	f individual)				****		17.			
Busin	ess or Resid	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)			100			
Name	of Associate	ed Broker o	or Dealer										
	in Which P								 -				☐ All States
☐ [A			□ [AR]		☐ [CO]				☐ [FL]	☐ [GA]	[HI]	□ [iD]	
	[מו] 🗆	□ [IA]	□ [KS]	[KY]	[LA]	[ME]	□ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]	
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Full N	ame (Last n	ame first, if	f individual)									
Busin	ess or Resid	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)				·- <u>-</u>		
Name	of Associate	ed Broker	or Dealer			,			-				
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[A		☐ [AZ]			•					☐ [GA]	☐ [HI]	□ [ID]	<u> </u>
	[IN]	□ [IA]	☐ [KS]	□ [KY]	☐ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ [M	T] 🗆 [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	☐ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	☐ [PA]	
□ [R] 🗆 [sc]	☐ [SD]	□ [TN]			[√T]	□ [VA]	□ [WA]				□ [PR]	
				(Use bla	nk sheet.	or copy an	d use add	itional copi	es of this	sheet, as r	necessary)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

•	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	. \$	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	. \$	0	\$	0
	Partnership Interests	. \$	5,000,000,000	<u>\$</u>	740,861,282
	Other (Specify))	. <u>\$</u>	0	<u>\$</u>	00
	Total	\$	5,000,000,000	<u>\$</u>	740,861,282
	Answer also in Appendix, Column 3, if filing under ULOE				
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		206	\$	740,861,282
	Non-accredited Investors		0	\$	0_
	Total (for filings under Rule 504 only)	·	0	\$	0
3.	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505	٠ ــــــــ	n/a	\$	n/a
	Regulation A	·	n/a	\$	n/a
	Rule 504		n/a	\$	n/a
	Total		n/a_	\$	n/a
١.	 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs		🗆	<u>\$</u>	0
	Legal Fees		🛛	\$	50,000
	Accounting Fees		🖾	\$	100,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total			 \$	150,000
	1961	•••••		<u> </u>	,

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPE	NSES	AND USE OF PR	OCEEDS	;
4	b. Enter the difference between the aggregate offerin Question 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C-Question 4.a. This differer	ice is the		\$	4,999,850,000
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. If the adjusted gross proceeds to the issuer set forth in respectively.	r any purpose is not known, furnish The total of the payments listed mu	an st equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	🗆	\$
	Purchase of real estate			\$	_ 🗆	\$
	Purchase, rental or leasing and installation of m	achinery and equipment		\$	🗆	\$
	Construction or leasing of plant buildings and fa	cilities		\$	🗆	\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the as pursuant to a merger	ssets or securities of another issuer		\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$
	Other (specify): <u>Investment in Partnership Intere</u>			\$	⊠	\$ 4,999,850,000
				\$		\$
	Column Totals			\$		\$ 4,999,850,000
	Total payments Listed (column totals added)				4,999	9,850,000
		D. FEDERAL SIGNATUR)E			
CO	is issuer has duly caused this notice to be signed by the nstitutes an undertaking by the issuer to furnish to the U. the issuer to any non-accredited investor pursuant to pa	undersigned duly authorized person S. Securities and Exchange Comm	n. If this	notice is filed under Ru oon written request of i	ule 505, the ts staff, the	following signature information furnished
	suer (Print or Type) eridian Horizon Fund, L.P.	Signature	m	12	Date -	4/11/06
Ву	me of Signer (Print or Type) :: Meridian Capital Partners, Inc., General Partner :: Laura K. Smith	Title of Signer (Print or Type) Managing Director – Operation	ns			•

	eridian Capital Partners, Inc., General Partner	Managing Director - Operations
Name	of Signer (Print or Type)	Title of Signer (Print or Type)
	(Print or Type) an Horizon Fund, L.P.	Signature Date 7/11/06
	suer has read this notification and knows the contentized person.	ts to be true and has duly caused this notice to be signed on its behalf by the undersigned duly
4.	·	er is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering ce is filed and understands that the issuer claiming the availability of this exemption has the burden satisfied.
3.	The undersigned issuer hereby undertakes to fur	rnish to the state administrators, upon written request, information furnished by the issuer to offerees.
2.	The undersigned issuer hereby undertakes to fur (17 CFR 239.500) at such times as required by s	rnish to any state administrator of any state in which this notice is filed a notice on Form D state law.
	See Ap	pendix, Column 5, for state response.
1.	provisions of such rule?	ntily subject to any of the disqualification

Instruction:

By: Laura K. Smith

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	;	2	3			4		5	;
State AL AK AZ AR	Intend to sell to non-accredited investors in State (Part B – Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		Х	LP Interests	1	\$785,000	0	\$0		Х
AK									
AZ		Х	LP Interests	1	\$1,000,000	0	\$0		х
AR									
CA		Х	LP Interests	16	\$30,659,801	0	\$0		X
со		Х	LP Interests	7	\$21,501,232	0	\$0		Х
СТ		Х	LP Interests	9	\$67,710,809	0	\$0		×
DE									
DC		х	LP Interests	2	\$2,120,000	0	\$0		×
FL		Х	LP Interests	24	\$37,444,096	0	\$0		х
GA		Х	LP Interests	3	\$1,750,000	0	\$0		X
ні									
ID									
íL		Х	LP Interests	2	\$3,195,679	0	\$0		х
IN									
IA									
KS		х	LP Interests	2	\$2,258,000	0	\$0		х
KY							1,000		
LA		х	LP Interests	20	\$112,193,221	0	\$0		×
ME									
MD		Х	LP Interests	1	\$147,000	0	\$0		×
MA		Х	LP Interests	8	\$24,989,197	0	\$0		×
MI		Х	LP Interests	4	\$5,204,752	0	\$0		Х
MN		Х	LP Interests	1	\$266,000	0	\$0		×
MS									
МО				werend William .			·		
MT					144-11				
NE									
NV									
NH				, .,			y		
NJ		×	LP Interests	6	\$4,034,020	0	\$0		X

APPENDIX

- '	•			AF	PENDIX						
1	:	2	3			4		5			
	Intend to sell to non-accredited investors in State (Part B – Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NM											
NY		Х	LP Interests	48	\$176,603,937	0	\$0		X		
NC								į			
ND											
ОН		Х	LP Interests	1	\$1,893,559	0	\$0		×		
ОК											
OR											
PA		X	LP Interests	19	\$79,490,816	0	\$0		×		
RI											
sc											
SD							<u> </u>		<u> </u>		
TN		X	LP Interests	4	\$34,138,260	0	\$0		X		
TX		X	LP Interests	7	\$9,535,974	0	\$0		X		
UT								ļ			
VT									_		
VA		X	LP Interests	1	\$1,000,000	0	\$0		X		
WA		X	LP Interests	12	\$36,359,750	0	\$0		×		
WV		Х	LP Interests	2	\$5,159,426	0	\$0		X		
WI											
WY				 	<u> </u>				<u> </u>		
Non- US		X	LP Interests	5	\$81,420,753	0	\$0		X		